Team Captain Evaluation Form

Thank you for participating in the Live Well Challenge. Your work as Team Captain was instrumental in the success of the Challenge. Please take a moment to complete this evaluation. Your responses will help us make improvements to the program.

- 1. Please choose one statement that most closely matches your opinion
 - a. I would become a Team Captain again without reservation
 - b. Though I support the program, I was not comfortable as a Team Captain
 - c. I would not become a Team Captain again because it took too much of my time
 - d. I would not become a Team Captain again because I do not support the program
- 2. About how many hours per week did you spend as a Team Captain?
 - a. 0 1
 - b. 1 2
 - c. 2 3
 - d. 4 5
 - e. 5 or more
- 3. Please rate the Team Captain Tool Kit (online tool)
 - a. Excellent
 - b. Very good
 - c. Satisfactory
 - d. Poor
 - e. Very poor
 - f. Did not use it / see it
- 4. Is there anything else you would have liked included with the Team Captain Tool Kit?

- 5. Please rate the Team Captain tutorial (PowerPoint)
 - a. Excellent
 - b. Very good
 - c. Satisfactory
 - d. Poor
 - e. Very poor
 - f. Did not use it / see it
- 6. As a Team Captain, I felt: (check all that apply)
 - a. well informed and prepared to promote the Live Well Challenge

b.	the Live Well Challenge leadership provided me with adequate assistance and
	support
c.	the tutorial prepared me for my responsibilities as a Team Captain
d.	the Tool Kit provided me with adequate information
e.	the web site answered many of my questions

- 7. The following responsibilities were difficult: (check all that apply)
 - a. Recruiting participants
 - b. Registering my team name
 - c. Collecting points from participant
 - d. Keeping participants motivated
 - e. Other (please specify)

8. I would become a Team Captain again with the following program responsibility
changes (please specify):

- 9. How successful do you think the Live Well Challenge was among your team members?
 - a. Very successful
 - b. Somewhat successful
 - c. Not at all successful
- 10. Participation could have been improved by: (check all that apply)
 - a. better training and orientation of Team Captains
 - b. better support from the Live Well Challenge coordinators
 - c. better marketing of the Live Well Challenge
 - d. better incentives
 - e. better support from my manager/supervisor
 - f. Other (please specify)
- 11. Overall, how would you rate the Live Well Challenge?
 - a. Excellent
 - b. Very good
 - c. Satisfactory
 - d. Poor
 - e. Very poor

12. How would you improve the Live Well Challenge?			

Please fax or mail completed evaluation form to:

Health Matters Team 400 Yesler Way, 5th Floor Seattle, WA 98104

King County Mailstop: YES-ES-0500

Fax 206.263.6694